# U.S. Department of Housing and Urban Development Office of Public and Indian Housing

Small PHA Plan Update
Annual Plan for Fiscal Year: 2001

NOTE: THIS PHA PLANS TEMPLATE (HUD 50075) IS TO BE COMPLETED IN ACCORDANCE WITH INSTRUCTIONS LOCATED IN APPLICABLE PIH NOTICES

# PHA Plan Agency Identification

PHA Name: Prestonsburg
PHA Number: KY035
PHA Fiscal Year Beginning: (mm/yyyy) 04/2001
PHA Plan Contact Information:  Name: Brenda Harris  Phone: 606-886-2717  TDD: 1-800-648-6056  Email (if available): rlbtbn@eastky.net
Public Access to Information Information regarding any activities outlined in this plan can be obtained by contacting: (select all that apply)  Main administrative office of the PHA PHA development management offices
Display Locations For PHA Plans and Supporting Documents
The PHA Plans (including attachments) are available for public inspection at: (select all that apply)  Main administrative office of the PHA PHA development management offices Main administrative office of the local, county or State government Public library PHA website Other (list below)
PHA Plan Supporting Documents are available for inspection at: (select all that apply)  Main business office of the PHA  PHA development management offices  Other (list below)
PHA Programs Administered:
Public Housing and Section 8  Section 8 Only Public Housing Only

# Annual PHA Plan Fiscal Year 2001

[24 CFR Part 903.7]

#### i. Table of Contents

Provide a table of contents for the Plan, including attachments, and a list of supporting documents available for public inspection. For Attachments, indicate which attachments are provided by selecting all that apply. Provide the attachment's name (A, B, etc.) in the space to the left of the name of the attachment. If the attachment is provided as a **SEPARATE** file submission from the PHA Plans file, provide the file name in parentheses in the space to the right of the title.

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Explanation of PHA Response (must be attached if not included in PHA	
Plan text)	
Attachment G: Progress for Meeting 5 Year Plan Mission and Goals	
ii. Executive Summary	
[24 CFR Part 903.7 9 (r)]	
At PHA option, provide a brief overview of the information in the Annual Plan	

# 1. Summary of Policy or Program Changes for the Upcoming Year In this section, briefly describe changes in policies or programs discussed in last year's PHA Plan that are not covered in other

sections of this Update.

Flat Rents were determined by comparing the Section 8 rent reasonableness study, survey of unassisted units in the neighborhood, amenities provided, operating costs of the PHA and set so as to encourage families who are attempting to become self-sufficient.

2. Capital Improvement Needs
[24 CFR Part 903.7 9 (g)] Exemptions: Section 8 only PHAs are not required to complete this component.
Exemptions. Section 8 only 1 11As are not required to complete this component.
A. Yes No: Is the PHA eligible to participate in the CFP in the fiscal year covered by this PHA Plan?
B. What is the amount of the PHA's estimated or actual (if known) Capital Fund Program grant for the upcoming year? \$ \$288,656
C. Yes No Does the PHA plan to participate in the Capital Fund Program in the upcoming year? If yes, complete the rest of Component 7. If no, skip to next component.
D. Capital Fund Program Grant Submissions
(1) Capital Fund Program 5-Year Action Plan
The Capital Fund Program 5-Year Action Plan is provided as Attachment C
The Suprair Fund Frogram & Four Florida is provided as Figure 10
(2) Canital Fund Duagram Annual Statement
(2) Capital Fund Program Annual Statement  The Capital Fund Program Annual Statement is gravided as Attachment P
The Capital Fund Program Annual Statement is provided as Attachment B
3. Demolition and Disposition
[24 CFR Part 903.7 9 (h)]
Applicability: Section 8 only PHAs are not required to complete this section.
1. Yes No: Does the PHA plan to conduct any demolition or disposition activities (pursuant to section 18 of the U.S. Housing Act of 1937 (42 U.S.C. 1437p)) in the plan Fiscal Year? (If "No", skip to next component; if "yes", complete one activity description for each development.)

# 2. Activity Description

Demolition/Disposition Activity Description	
(Not including Activities Associated with HOPE VI or Conversion Activities)	
1a. Development name:	
1b. Development (project) number:	
2. Activity type: Demolition	
Disposition	
3. Application status (select one)	
Approved	
Submitted, pending approval	
Planned application	
4. Date application approved, submitted, or planned for submission: (DD/MM/YY)	
5. Number of units affected:	
6. Coverage of action (select one)	
Part of the development	
Total development	
7. Relocation resources (select all that apply)	
Section 8 for units	
Public housing for units	
Preference for admission to other public housing or section 8	
Other housing for units (describe below)	
8. Timeline for activity:	
a. Actual or projected start date of activity:	
b. Actual or projected start date of relocation activities:	
c. Projected end date of activity:	
4. Voucher Homeownership Program	
[24 CFR Part 903.7 9 (k)]	
A. 🗌 Yes 🔀 No: Does the PHA plan to administer a Section 8 Homeownership progra	
pursuant to Section 8(y) of the U.S.H.A. of 1937, as implemented by	
CFR part 982 ? (If "No", skip to next component; if "yes", describe	
program using the table below (copy and complete questions for each	1
program identified.)	
<b>B.</b> Capacity of the PHA to Administer a Section 8 Homeownership Program  The PHA has demonstrated its capacity to administer the program by (select all that apply):	
The PHA has demonstrated its capacity to administer the program by (select all that apply):	

Printed on: 1/16/013:34 AM Establishing a minimum homeowner downpayment requirement of at least 3 percent and requiring that at least 1 percent of the downpayment comes from the family's resources Requiring that financing for purchase of a home under its section 8 homeownership will be provided, insured or guaranteed by the state or Federal government; comply with secondary mortgage market underwriting requirements; or comply with generally accepted private sector underwriting standards Demonstrating that it has or will acquire other relevant experience (list PHA experience, or any other organization to be involved and its experience, below): 5. Safety and Crime Prevention: PHDEP Plan [24 CFR Part 903.7 (m)] Exemptions Section 8 Only PHAs may skip to the next component PHAs eligible for PHDEP funds must provide a PHDEP Plan meeting specified requirements prior to receipt of PHDEP funds. A. Yes No: Is the PHA eligible to participate in the PHDEP in the fiscal year covered by this PHA Plan? B. What is the amount of the PHA's estimated or actual (if known) PHDEP grant for the upcoming year? \$ \_\_\_\_\_ C. Yes No Does the PHA plan to participate in the PHDEP in the upcoming year? If yes, answer question D. If no, skip to next component. D. Yes No: The PHDEP Plan is attached at Attachment \_\_\_\_\_ 6. Other Information [24 CFR Part 903.7 9 (r)] A. Resident Advisory Board (RAB) Recommendations and PHA Response 1. Yes No: Did the PHA receive any comments on the PHA Plan from the Resident Advisory Board/s? 2. If yes, the comments are Attached at Attachment (File name) G 3. In what manner did the PHA address those comments? (select all that apply) The PHA changed portions of the PHA Plan in response to comments A list of these changes is included

Yes No: at the end of the RAB Comments in Attachment \_\_\_\_\_.

Yes No: below or

			Considered comments, but determined that no changes to the PHA Plan were necessary. An explanation of the PHA's consideration is included at the at the end of the RAB Comments in Attachment _G			
			Other: (list below)			
			of Consistency with the Consolidated Plan Dele Consolidated Plan, make the following statement (copy questions as many times as necessary).			
	1. 2.	The P	lidated Plan jurisdiction: <u>KHC</u> HA has taken the following steps to ensure consistency of this PHA Plan with the lidated Plan for the jurisdiction: (select all that apply)			
			The PHA has based its statement of needs of families in the jurisdiction on the needs expressed in the Consolidated Plan/s.  The PHA has participated in any consultation process organized and offered by the Consolidated Plan agency in the development of the Consolidated Plan.  The PHA has consulted with the Consolidated Plan agency during the development of this PHA Plan.  Activities to be undertaken by the PHA in the coming year are consistent with specific initiatives contained in the Consolidated Plan.  (list such initiatives below)  Both endeavor to provide decent, safe, and affordable housing to low-income applicants.  Other: (list below)			
3.			lests for support from the Consolidated Plan Agency lo: Does the PHA request financial or other support from the State or local government agency in order to meet the needs of its public housing residents or inventory? If yes, please list the 5 most important requests below:			
4.	sub saf and pro	d commostantiale, decer d constr	olidated Plan of the jurisdiction supports the PHA Plan with the following actions itments: (describe below) The primary priority of the Consolidate Plan is to the lay increase the preservation, production, sound management and affordability of the and affordable rental housing for very low income families through rehabilitation auction subsidies and rental assistance which corresponds with the PHA mission to dequate and affordable housing and to provide and maintain safe, quality housing affective and non-discriminatory manner.			
	C. Criteria for Substantial Deviation and Significant Amendments  1. Amendment and Deviation Definitions					
		Part 903				

PHAs are required to define and adopt their own standards of substantial deviation from the 5-year Plan and Significant Amendment to the Annual Plan. The definition of significant amendment is important because it defines when the PHA will subject a change to the policies or activities described in the Annual Plan to full public hearing and HUD review before implementation.

A. Substantial Deviation from the 5-year Plan: <u>Changes to the five year plan which</u> redirect the PHA mission, goals, or objectives to meet the needs of the PHA residents.

B. Significant Amendment or Modification to the Annual Plan: Significant changes or additions to the Annual Statement of Capital Improvements Needs resulting in a budget revision of more than fifty percent of total grant funding or changes to the admissions, rent policies and waiting list organization other than those required by funding constraints and regulatory changes.

# <u>Attachment\_A\_</u> Supporting Documents Available for Review

PHAs are to indicate which documents are available for public review by placing a mark in the "Applicable & On Display" column in the appropriate rows. All listed documents must be on display if applicable to the program activities conducted by the PHA.

List of Supporting Documents Available for Review					
Applicable & On Display	Supporting Document	Related Plan Component			
X	PHA Plan Certifications of Compliance with the PHA Plans and Related Regulations	5 Year and Annual Plans			
	State/Local Government Certification of Consistency with the Consolidated Plan (not required for this update)	5 Year and Annual Plans			
X	Fair Housing Documentation Supporting Fair Housing Certifications: Records reflecting that the PHA has examined its programs or proposed programs, identified any impediments to fair housing choice in those programs, addressed or is addressing those impediments in a reasonable fashion in view of the resources available, and worked or is working with local jurisdictions to implement any of the jurisdictions' initiatives to affirmatively further fair housing that require the PHA's involvement.	5 Year and Annual Plans			
X	Housing Needs Statement of the Consolidated Plan for the jurisdiction/s in which the PHA is located and any additional backup data to support statement of housing needs in the jurisdiction	Annual Plan: Housing Needs			
X	Most recent board-approved operating budget for the public housing program	Annual Plan: Financial Resources			
X	Public Housing Admissions and (Continued) Occupancy Policy (A&O/ACOP), which includes the Tenant Selection and Assignment Plan [TSAP]	Annual Plan: Eligibility, Selection, and Admissions Policies			
X	Any policy governing occupancy of Police Officers in Public Housing  check here if included in the public housing  A&O Policy	Annual Plan: Eligibility, Selection, and Admissions Policies			
X	Section 8 Administrative Plan	Annual Plan: Eligibility, Selection, and Admissions Policies			
X	Public housing rent determination policies, including the method for setting public housing flat rents  check here if included in the public housing A & O Policy	Annual Plan: Rent Determination			

List of Supporting Documents Available for Review						
Applicable &	Supporting Document	Related Plan Component				
On Display X	Schedule of flat rents offered at each public housing development  check here if included in the public housing  A & O Policy	Annual Plan: Rent Determination				
X	Section 8 rent determination (payment standard) policies  check here if included in Section 8 Administrative Plan	Annual Plan: Rent Determination				
X	Public housing management and maintenance policy documents, including policies for the prevention or eradication of pest infestation (including cockroach infestation)	Annual Plan: Operations and Maintenance				
X	Results of latest binding Public Housing Assessment System (PHAS) Assessment	Annual Plan: Management and Operations				
X	Follow-up Plan to Results of the PHAS Resident Satisfaction Survey (if necessary)	Annual Plan: Operations and Maintenance and Community Service & Self-Sufficiency				
X	Results of latest Section 8 Management Assessment System (SEMAP)	Annual Plan: Management and Operations				
	Any required policies governing any Section 8 special housing types  check here if included in Section 8 Administrative Plan	Annual Plan: Operations and Maintenance				
X	Public housing grievance procedures  check here if included in the public housing A & O Policy	Annual Plan: Grievance Procedures				
X	Section8 informal review and hearing procedures  check here if included in Section 8 Administrative Plan	Annual Plan: Grievance Procedures				
X	The HUD-approved Capital Fund/Comprehensive Grant Program Annual Statement (HUD 52837) for any active grant year	Annual Plan: Capital Needs				
X	Most recent CIAP Budget/Progress Report (HUD 52825) for any active CIAP grants  Approved HOPE VI applications or, if more recent, approved or submitted HOPE VI Revitalization Plans, or any other approved proposal for development of public housing	Annual Plan: Capital Needs Annual Plan: Capital Needs				
X	Self-evaluation, Needs Assessment and Transition Plan required by regulations implementing §504 of the Rehabilitation Act and the Americans with Disabilities Act. See, PIH 99-52 (HA).	Annual Plan: Capital Needs				
	Approved or submitted applications for demolition and/or disposition of public housing	Annual Plan: Demolition and Disposition				
	Approved or submitted applications for designation of public housing (Designated Housing Plans)	Annual Plan: Designation of Public Housing				

List of Supporting Documents Available for Review						
Applicable & On Display	Supporting Document	Related Plan Component				
On Display	Approved or submitted assessments of reasonable revitalization of public housing and approved or submitted conversion plans prepared pursuant to section 202 of the 1996 HUD Appropriations Act, Section 22 of the US Housing Act of 1937, or Section 33 of the US Housing Act of 1937	Annual Plan: Conversion of Public Housing				
	Approved or submitted public housing homeownership programs/plans  Policies governing any Section 8 Homeownership program	Annual Plan: Homeownership Annual Plan:				
	(sectionof the Section 8 Administrative Plan)	Homeownership				
X	Cooperation agreement between the PHA and the TANF agency and between the PHA and local employment and training service agencies  FSS Action Plan/s for public housing and/or Section 8	Annual Plan: Community Service & Self-Sufficiency Annual Plan: Community Service &				
X	Section 3 documentation required by 24 CFR Part 135, Subpart E	Self-Sufficiency Annual Plan: Community Service & Self-Sufficiency				
	Most recent self-sufficiency (ED/SS, TOP or ROSS or other resident services grant) grant program reports	Annual Plan: Community Service & Self-Sufficiency				
	The most recent Public Housing Drug Elimination Program (PHEDEP) semi-annual performance report	Annual Plan: Safety and Crime Prevention				
	PHDEP-related documentation:  Baseline law enforcement services for public housing developments assisted under the PHDEP plan;  Consortium agreement/s between the PHAs participating in the consortium and a copy of the payment agreement between the consortium and HUD (applicable only to PHAs participating in a consortium as specified under 24 CFR 761.15);  Partnership agreements (indicating specific leveraged support) with agencies/organizations providing funding, services or other in-kind resources for PHDEP-funded activities;  Coordination with other law enforcement efforts;  Written agreement(s) with local law enforcement agencies (receiving any PHDEP funds); and  All crime statistics and other relevant data (including Part I and specified Part II crimes) that establish need for the public housing sites assisted under the PHDEP Plan.	Annual Plan: Safety and Crime Prevention				
X	Policy on Ownership of Pets in Public Housing Family Developments (as required by regulation at 24 CFR Part 960, Subpart G)  check here if included in the public housing A & O Policy	Pet Policy				

List of Supporting Documents Available for Review				
Applicable & On Display	Supporting Document	Related Plan Component		
X	The results of the most recent fiscal year audit of the PHA conducted under section 5(h)(2) of the U.S. Housing Act of 1937 (42 U. S.C. 1437c(h)), the results of that audit and the PHA's response to any findings	Annual Plan: Annual Audit		
	Troubled PHAs: MOA/Recovery Plan	Troubled PHAs		
X	Other supporting documents – Community Service Policy	Community Service Policy		

Ann	Annual Statement/Performance and Evaluation Report-ATTACHMENT B					
Cap	ital Fund Program and Capital Fund P	rogram Replacem	ent Housing Factor (	CFP		
	Jame: Housing Authority of Prestonsburg	Grant Type and Number				
		Capital Fund Program: K	Y36P035-502(01)			
		Capital Fund Program	` '			
		Replacement Housing				
	ginal Annual Statement		<u> </u>	evised A		
	formance and Evaluation Report for Period Ending:		e and Evaluation Report			
Line	Summary by Development Account	Total Es	timated Cost			
No.						
		Original	Revised			
1	Total non-CFP Funds					
2	1406 Operations	20,000				
3	1408 Management Improvements	6,000				
4	1410 Administration	1,500				
5	1411 Audit					
6	1415 liquidated Damages					
7	1430 Fees and Costs	33,000				
8	1440 Site Acquisition					
9	1450 Site Improvement	14,100				
10	1460 Dwelling Structures	206,056				
11	1465.1 Dwelling Equipment—Nonexpendable					
12	1470 Nondwelling Structures					
13	1475 Nondwelling Equipment					
14	1485 Demolition					
15	1490 Replacement Reserve					
16	1492 Moving to Work Demonstration					
17	1495.1 Relocation Costs	8,000				
18	1498 Mod Used for Development					
19	1502 Contingency					
20	Amount of Annual Grant: (sum of lines 2-19)	288,656				
21	Amount of line 20 Related to LBP Activities	29,000				
22	Amount of line 20 Related to Section 504 Compliance					
23	Amount of line 20 Related to Security					
24	Amount of line 20 Related to Energy Conservation Measures					

# Annual Statement/Performance and Evaluation Report Capital Fund Program and Capital Fund Program Replacement Housing Factor (CFP/ Part II: Supporting Pages

Turving ruges							
PHA Name: Housing Authority of Prestonsburg		Grant Type and Number Capital Fund Program #: KY36PO35-502(01)					
		Capital Fund Program					
		Replacement !	Housing Factor #	<i>‡</i> :			
Development	General Description of Major Work	Dev. Acct No.	Quantity	Total Estimated Cost			
Number	Categories				I		
Name/HA-Wide				Original	Revised		
Activities				,			
PHA Wide	Operations	1406		20,000			
PHA Wide	Administrative Salary	1408		6,000			
PHA-Wide	Printing and Advertising	1410		1,500			
PHA-Wide	A/E Fees	1430	Lump Sum	15,500			
PHA-Wide	Consulting Fees	1430	Lump Sum	15,500			
	Air Monitoring	1430	Lump Sum	2,000			
KY35-02	Porch Railings- Porch Improvement	1460	18	5,850			
KY35-02	Playground Equipment	1450	Lump Sum	10,000			
KY35-03	Yard Drainage	1450	Lump Sum	1,500			
KY35-03	Concrete Pads	1450	40	2,600			
KY35-01	Porch Lights	1460	40	5,800			
KY35-02	Sewerline Replacement & Abatement	1460		37,506			
KY35-03	Roofing	1460		70,900			
KY35-03	Through-Wall A/C Units	1460	30	57,000			
KY35-01	Front Porch Poles	1460	42	29,000			
PHA Wide	Relocation	1495.1		8,000			

Annual Statement/Performance and Evaluation Report						
_	-	und Prog	gram Replac	ement Hous	ing Factor	r (CFP/
						1
nority of				7.700(01)		Federal
1						
(Qı	iart Ending Da	ite)	(Q	uarter Ending Dat	e)	
	T	Т			T	
	Revised	Actual		Revised	Actual	
3/31/03			9/30/04			
	gram and entation S nority of	gram and Capital F entation Schedule ority of Grant Capit Ca	gram and Capital Fund Program and Schedule  Incrity of Grant Type and Nun Capital Fund Program Capital Fund Program Capital Fund Program All Fund Obligated (Quart Ending Date)  Original Revised Actual	gram and Capital Fund Program Replacementation Schedule  Tority of Grant Type and Number  Capital Fund Program #: KY36PO34  Capital Fund Program Replacement How  All Fund Obligated A  (Quart Ending Date) (Q  Original Revised Actual Original	gram and Capital Fund Program Replacement House entation Schedule  ority of Grant Type and Number Capital Fund Program #: KY36PO35-502(01) Capital Fund Program Replacement Housing Factor #:  All Fund Obligated (Quart Ending Date) (Quarter Ending Date)  Original Revised Actual Original Revised	gram and Capital Fund Program Replacement Housing Factor entation Schedule  Tority of Grant Type and Number Capital Fund Program #: KY36PO35-502(01) Capital Fund Program Replacement Housing Factor #:  All Fund Obligated (Quart Ending Date) (Quarter Ending Date)  Original Revised Actual Original Revised Actual

# **Attachment C**

# Capital Fund Program 5-Year Action Plan

☐ Original stateme	ent 🔀 Revised statement		
Development	Development Name		
Number	(or indicate PHA wide)		
	Indian Hills Apartments		
35-2			
Description of Needed Physical Improvements or Management Estimated Cost			Planned Start Date
Improvements		(HA Fiscal Year)	

140	400.000	
A/C – Elderly Units	\$33,000	2002
Update Electrical Panels	15,000	2002
Entry Door Lever Hardware (Elderly)	6,000	2002
HVAC	60,000	2003
Cover Duct Work	5,000	2003
Bathroom Upgrades		
Faucets	10,500	2004
Shower Faucets	8,400	2004
Medicine Cabinets	2,500	2004
Water Closets	5,500	2004
Tub Surrounds (42)	30,450	2004
Vinyl Flooring	30,336	2004
Water Heaters	5,250	2004
Yard Drainage	6,000	2005
Sidewalk Replacement	10,000	2005
Playground Equipment	15,000	2005
Total estimated cost over next 5 years	\$242,936	

# **Capital Fund Program 5-Year Action Plan**

	CFP 5-Year Action Plan		7
Original stateme	ent   Revised statement		
Development	Development Name		
Number	(or indicate PHA wide)		
35	PHA-Wide Non-Dwelling		
Description of Need Improvements	ed Physical Improvements or Management	<b>Estimated Cost</b>	Planned Start Date (HA Fiscal Year)
Maintenance Buildi Maintenance Truck Carpet/Tile – Admin Furniture/tables – C Lawn Mowers (2)	nistrative Offices & Community Buildings, Update	\$ 8,656 20,000 30,000 6,500 12,000	2002 2002 2005 2005 2005
Total estimated cost	over next 5 years	\$ 77,156	

# **Capital Fund Program 5-Year Action Plan**

CFP 5-Year Action Plan		
☐ Original statement ☐ Revised statement		
Development Number	Development Name (or indicate PHA wide)	
35-1	Green Acres	
Description of Needed Physical Improvements or Management Improvements	Estimated Cost	Planned Start Date (HA Fiscal Year)
HVAC Installation	\$120,000	2002
Roofing Kitchen Upgrades	70,220	2003
Cabinets	38,000	2003
Countertops	6,000	2003
Rangehoods	9,000	2003
Sinks/Faucets	11,000	2003
Lights	4,000	2003
Water heaters	5,500	2003
Community Building Addition	62,800	2005
Gutter Guards	9,000	2004
Total Estimated Costs over next 5 years	\$ 335,520	

### **Capital Fund Program 5-Year Action Plan**

Original statem	CFP 5-Year Action Plan nent ⊠ Revised statement		
Development	Development Name		
Number	(or indicate PHA wide)		
35	PHA-Wide Dwelling Equipment		
Description of Need Improvements	led Physical Improvements or Management	Estimated Cost	Planned Start Date (HA Fiscal Year)
New Stoves (40) New Refrigerators Handicapped walk- Stoves/Refrigerator Carbon Monoxide	s	\$ 10,000 5,436 25,000 5,000 40,000	2003 2003 2005 2005 2005
Total estimated cos	t over nevt 5 veers	\$ 85.436	
Total estimated cos	t over next 5 years	\$ 85,436	

### **Capital Fund Program 5-Year Action Plan**

	CFP 5-Year Action Plan		
Original statem	ent 🛛 Revised statement		
Development	Development Name		
Number	(or indicate PHA wide)		
35	PHA Wide Management Improvements		
	led Physical Improvements or Management	<b>Estimated Cost</b>	Planned Start Date
Improvements		+	(HA Fiscal Year)
Management Impro Computer Upgrade Management Impro Management Impro Computer Upgrade	s ovements ovements ovements	\$ 3,500 5,000 4,000 4,000 5,000 10,000	2002 2002 2003 2004 2005 2005
Total estimated cos	t over next 5 years	\$ 31,500	

# **Capital Fund Program 5-Year Action Plan**

Original state	CFP 5-Year Action Plan		
<b>Development</b>	Development Name		
Number	(or indicate PHA wide)		
35-3	Dixie Apartments		
Description of Ne Improvements	eded Physical Improvements or Management	<b>Estimated Cost</b>	Planned Start Date (HA Fiscal Year)
Update Lift Static Store Front wind Resurface Parkin HVAC Upgrades	ows –Administration Building g Lot	\$ 25,000 8,000 10,220 120,000	2002 2003 2004 2004
Total estimated co	ost over next 5 years	\$163,220	

# **PHA Public Housing Drug Elimination Program Plan**

Note: THIS PHDEP Plan template (HUD 50075-PHDEP Plan) is to be completed in accordance with Instructions located in applicable PIH Notices.

Section 1: General Information/History			
<ul><li>A. Amount of PHDEP Grant \$</li><li>B. Eligibility type (Indicate with an "x")</li></ul>	N1 N2	R	
		K	
C. FFY in which funding is requested			
<b>D.</b> Executive Summary of Annual PHDEP II In the space below, provide a brief overview of the PHDI		s of major initiatives or s	activities
undertaken. It may include a description of the expected of			
sentences long			
E. Target Areas			
Complete the following table by indicating each PHDEP	Target Area (development o	or site where activities w	ill be
conducted), the total number of units in each PHDEP Tar			
participate in PHDEP sponsored activities in each Target	Area. Unit count information	on should be consistent v	vith that
available in PIC.			
DYDER # 4.4	TD 4 1 11 0 TT 44 441 4	[m , 1p , 1 , 1	
PHDEP Target Areas (Name of development(s) or site)	Total # of Units within the PHDEP Target	Total Population to be Served within	
(Name of development(s) of site)	Area(s)	the PHDEP Target	
	11100(0)	Area(s)	
F. Duration of Program			
Indicate the duration (number of months funds will be rec			Plan (place
			Plan (place
Indicate the duration (number of months funds will be rec			Plan (place
Indicate the duration (number of months funds will be red an "x" to indicate the length of program by # of months.	For "Other", identify the #	of months).	Plan (place
Indicate the duration (number of months funds will be rec	For "Other", identify the #	of months).	Plan (place
Indicate the duration (number of months funds will be red an "x" to indicate the length of program by # of months.	For "Other", identify the #	of months).	Plan (place
Indicate the duration (number of months funds will be red an "x" to indicate the length of program by # of months.  12 Months 18 Months	For "Other", identify the #	of months).	Plan (place
Indicate the duration (number of months funds will be red an "x" to indicate the length of program by # of months.	For "Other", identify the # <b>24 Months</b>	of months).	·

Fiscal Year of Funding	PHDEP Funding Received	Grant #	Fund Balance as of Date of this Submission	Grant Extensions or Waivers	Grant Start Date	Grant Term End Date
FY 1995						
FY 1996						
FY 1997						

submission, indicate the fund balance and anticipated completion date. The Fund Balances should reflect the balance as of Date of Submission of the PHDEP Plan. The Grant Term End Date should include any HUD-approved extensions or

waivers. For grant extensions received, place "GE" in column or "W" for waivers.

FY1998			
FY 1999			

#### **Section 2: PHDEP Plan Goals and Budget**

#### A. PHDEP Plan Summary

In the space below, summarize the PHDEP strategy to address the needs of the target population/target area(s). Your summary should briefly identify: the broad goals and objectives, the role of plan partners, and your system or process for monitoring and evaluating PHDEP-funded activities. This summary should not exceed 5-10 sentences.

#### **B. PHDEP Budget Summary**

Enter the total amount of PHDEP funding allocated to each line item.

FFY PHDEP Budget Summary		
Original statement		
Revised statement dated:		
Budget Line Item	Total Funding	
9110 - Reimbursement of Law Enforcement		
9115 - Special Initiative		
9116 - Gun Buyback TA Match		
9120 - Security Personnel		
9130 - Employment of Investigators		
9140 - Voluntary Tenant Patrol		
9150 - Physical Improvements		
9160 - Drug Prevention		
9170 - Drug Intervention		
9180 - Drug Treatment		
9190 - Other Program Costs		
TOTAL PHDEP FUNDING		

#### C. PHDEP Plan Goals and Activities

In the tables below, provide information on the PHDEP strategy summarized above by budget line item. Each goal and objective should be numbered sequentially for each budget line item (where applicable). Use as many rows as necessary to list proposed activities (additional rows may be inserted in the tables). PHAs are not required to provide information in shaded boxes. Information provided must be concise—not to exceed two sentences in any column. Tables for line items in which the PHA has no planned goals or activities may be deleted.

9110 - Reimbursement of Law Enforcement		Total PHDEP Funding: \$
Goal(s)		
Objectives		

Proposed Activities	# of Persons Served	Target Population	Start Date	Expected Complete Date	PHEDE P Funding	Other Funding (Amount/ Source)	Perfo
1.	Berved			Bute	Tunung	Bource)	
2.							
3.							

9115 - Special Initiative					Total PHDEP Funding: \$		
Goal(s)							
Objectives							
Proposed Activities	# of	Target	Start	Expected	PHEDEP	Other Funding	Pe
_	Persons	Population	Date	Complete	Funding	(Amount/	
	Served	_		Date		Source)	
1.							
2.							
3.							

9116 - Gun Buyback	TA Match	Total PHDEP Funding: \$					
Goal(s)					•		
Objectives							
Proposed Activities	# of Persons Served	Target Population	Start Date	Expected Complete Date	PHEDEP Funding	Other Funding (Amount /Source)	Perform
1.							
2.							
3.							

9120 - Security Personnel		Total PHDEP Funding: \$					
Goal(s)							
Objectives							
Proposed Activities	# of Persons Served	Target Population	Start Date	Expected Complete Date	PHEDEP Funding	Other Funding (Amount /Source)	Perf
1.							
2.							
3.							

9130 – Employment of	Investigators	Total PHDEP Funding: \$					
Goal(s)							
Objectives							
Proposed Activities	# of Persons Served	Target Population	Start Date	Expected Complete Date	PHEDEP Funding	Other Funding (Amount /Source)	Per
1.	561.66			Butt			
2.							
3.							

9140 – Voluntary Tenant Pat	rol				Total PHDEP Funding: \$			
Goal(s)					<u> </u>			
Objectives								
Proposed Activities	# of Persons Served	Target Population	Start Date	Expected Complete Date	PHEDEP Funding	Other Funding (Amount /Source)	Per	
1.								
2.								
3.								

9150 - Physical Improven	nents	Total PHDEP Funding: \$					
Goal(s)							
Objectives							
Proposed Activities	# of Persons Served	Target Population	Start Date	Expected Complete Date	PHEDEP Funding	Other Funding (Amount /Source)	Perfor
1.							
2.							
3.							

9160 - Drug Prevention	Total PHDEP Funding: \$						
Goal(s)							
Objectives							
Proposed Activities	# of Persons Served	Target Population	Start Date	Expected Complete Date	PHEDEP Funding	Other Funding (Amount /Source)	Perfo
1.							
2.							
3.							

9170 - Drug Intervention	Total PHDEP Funding: \$						
Goal(s)					,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,		
Objectives							
Proposed Activities	# of Persons Served	Target Population	Start Date	Expected Complete Date	PHEDEP Funding	Other Funding (Amount /Source)	Per
1.							
2.							
3.							

9180 - Drug Treatment	Total PHDEP Funding: \$
Goal(s)	

Objectives								
Proposed Activ	ities	# of	Target	Start	Expected	PHEDEP	Other Funding	Perforr
		Person	Population	Date	Complete	Funding	(Amount /Source)	
		S			Date			
		Served						
1.								
2.								
3.								

9190 - Other Program	Costs				Total PHDEP Funds: \$			
Goal(s)					IL			
Objectives								
Proposed Activities	# of Person s Served	Target Population	Start Date	Expected Complete Date	PHEDEP Funding	Other Funding (Amount /Source)	Perfor	
1.								
2.								
3.								

# Required Attachment $\underline{D}$ Resident Member on the PHA Governing Board

1. ☐ Yes ⊠ No:	Does the PHA governing board include at least one member who is directly assisted by the PHA this year? (if no, skip to #2)
A. Name of resident member(s) on the governing board:	
B. How was the reside Electe Appo	
C. The term of appointment is (include the date term expires):	
assisted by the F	erning board does not have at least one member who is directly PHA, why not? The PHA is located in a State that requires the members of a governing board to be salaried and serve on a full time basis the PHA has less than 300 public housing units, has provided easonable notice to the resident advisory board of the opportunity of serve on the governing board, and has not been notified by any esident of their interest to participate in the Board. Other (explain): One Board Member who resigned effective fanuary 1, 2001 has created a vacancy on the Board of Commissioners. The Mayor has advised that a resident will be appointed to fill this vacancy at the council meeting scheduled for anuary 22, 2001.

- B. Date of next term expiration of a governing board member:
- C. Name and title of appointing official(s) for governing board (indicate appointing official for the next position): Mayor Jerry Fannin

# Required Attachment <u>E</u> Membership of the Resident Advisory Board or Boards

List members of the Resident Advisory Board or Boards: (If the list would be unreasonably long, list organizations represented or otherwise provide a description sufficient to identify how members are chosen.)

Shelia Wright Joan Hite William Yielding Dorothy Osborne Lonzo Bryant

#### ATTACHMENT F - RESIDENT ADVISORY BOARD COMMENTS AND PHA RESPONSE

The resident advisory board made the following comments regarding our five year and annual plan:

Green Acres: Requested new front porch lights, front porch poles painted, central air and utility room cabinet doors.

Indian Hills: Hand rails for elderly porches, front porches are too slippery, cover combustion air pipes in family apartments, replace sewer lines and additional playground equipment.

Dixie: New roofs, drainage needed at entrance to elderly units, and air conditioning for elderly apts.

PHA Wide: Computer Classes and GED Classes.

General Comments: No Pets, Maintenance is excellent and office staff very helpful.

The PHA has addressed all comments in the annual or five year plan with the exception of the following:

Central Air Our priority for air conditioning will be for our

elderly designated apartments. Family apartments will be addressed in a later plan if funds allow.

**Utility Room Cabinet** 

**Doors** 

Utility room cabinet doors will be addressed in

a later plan if funds allow.

PHA Wide A meeting will be scheduled for all residents to

ascertain if there is enough interest to warrant

classes.

Pets Resident Advisory Board indicated no interest in

allowing pets, however, PHA has a Pet Policy per requirements of Final Rule on Pet Ownership in Public Housing and will implement upon

approval of PHA Plan update.

# ATTACHMENT G - PROGRESS IN MEETING 5 YEAR PLAN MISSION AND GOALS

The progress made by the Prestonsburg Housing Authority in meeting the mission and goals of the 5 year plan are as follows:

In an effort to increase customer satisfaction, we have implemented an applicant survey in June, 1999.

Managed the Housing Authority efficiently and effectively to receive an advisory score of 92.9 from the Public Housing Assessment System.

In an effort to encourage self-sufficiency, we have partnershipped with the County Extension Office and offer to the residents an opportunity to attend classes on self-sufficiency. Transportation is provided by the Housing Authority to these classes.

In order to affirmatively further fair housing, we have advertised in the local paper and radio and provided training to our staff.

The Section 8 Program has implemented new practices to monitor utilization of funds expended, rent adjustments, inspections and waiting lists. The briefings are conducted in a group setting, using a video produced by this Housing Authority. It provides continuity in the information presented to voucher issuance.

The Section 8 Program staff conducted outreach to landlords which resulted in our adding 25 new owners to the Section 8 Program, 50% of the Five Year Goal.

Additional handicapped parking is currently under construction at the Indian Hills site. Handicapped parking is planned at the Community Room at Green Acres in the FFY 2000 funding cycle.